

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America	COURT CASE NUMBER 1:21-cr-41-JL
DEFENDANT Ian Freeman	TYPE OF PROCESS Final Order of Forfeiture

RECEIVED

MAY 20 2024

SERVE
ATNAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
see below

ADDRESS (Street or RFD, Apartment No., Box, Suite, etc.)

U.S. MARSHALS SERVICE

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Robert J. Rabuck, AUSA, Chief, Civil Division
United States Attorney's Office, 53 Pleasant Street, 4th Floor, Concord, NH 03301
Rob.Rabuck@usdoj.gov

Number of process to be served with this Form 285 1

Number of parties to be served in this case 1

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Please dispose of (21-FBI-005180) \$30,980.00 U.S. Currency from inside Bitcoin ATM, according to the Final Order of Forfeiture.

Signature of Attorney other Originator requesting service on behalf of:

ROBERT RABUCK Digitally signed by ROBERT RABUCK
Date: 2024.05.20 15:54:21 -04'00'

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

603-225-1552

DATE

5/20/24

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 49	District to Serve No. 49	Signature of Authorized USMS Deputy or Clerk Kate Renaud	Date 5/20/24
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Date
5/21/24

Time ☐ am
☐ pm

Address (complete only different than shown above)

Signature of U.S. Marshal or Deputy

Kate Renaud

Costs shown on attached USMS Cost Sheet >>

REMARKS

Transferred \$30,980.00
to the AFF